

# WESTCHESTER GOLF ASSOCIATION CADDIE SCHOLARSHIP FUND

Founded in 1956 by Udo Reinach and William P. Turnesa  
SERVING WESTCHESTER GOLF ASSOCIATION MEMBER CLUBS

Located in Fairfield (CT), Bronx, Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester Counties (NY)



WGA CADDIE SCHOLARSHIP FUND  
49 KNOLLWOOD ROAD, SUITE 220  
ELMSFORD, NY 10523-2813  
PHONE: 914 347 2340  
FAX: 914 347 2418



e-mail: [info@westchestergolf.org](mailto:info@westchestergolf.org)  
website: [www.westchestergolf.org](http://www.westchestergolf.org)

## APPLICATION FOR FINANCIAL NEED SCHOLARSHIP DUE APRIL 15<sup>TH</sup>

### ELIGIBILITY & REQUIREMENTS

1. A candidate must have served a minimum of **two seasons** in “**service to golf**” at a Westchester Golf Association (WGA) member club. “Service to golf” includes caddying, work in the golf shop, bag room, on the practice range and golf course superintendent’s crew. **Please note that members or children of members of WGA private clubs are not eligible to apply.**
2. A candidate must establish **financial need** by submitting copies of the FAFSA (Free Application for Federal Student Aid), SAR (Student Aid Report), parents’ and personal income tax returns, and financial aid decisions.
3. A candidate must have applied to or attend a university, college, or accredited trade school, and must demonstrate scholastic ability by submitting SAT/ACT scores and high school and/or college transcripts. **Please note that graduate students are not eligible to apply.**

### INSTRUCTIONS

1. Fill out this application (type or print in ink) and return it to the Caddie Scholarship Fund (CSF) office **no later than April 15<sup>th</sup>**. You will receive a letter from the CSF office confirming receipt of your application.
2. In order to complete your application, it will be necessary for you to submit the following supporting documents:
  - a. **High School Transcript and SAT/ACT scores**
  - b. **College transcript (If applicable)**
  - c. **Copy of FAFSA filed with the Federal Student Aid Programs \***
  - d. **Copy of SAR – result of FAFSA with EFC number**
  - e. **Copy of applicant and family’s most recent Income Tax Return**
  - f. **Copy of financial aid award letter from college (i.e., grants, loans, work study, etc.)**
  - g. **Other scholarship information (If applicable)**

\* Please file the FAFSA as soon as possible after January 1. The online FAFSA application is preferred and can be accessed at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). To complete the online FAFSA, you will also need a PIN to access and sign your FAFSA application. To obtain a PIN, go to [www.pin.ed.gov](http://www.pin.ed.gov). Once processed, you will receive the SAR in approximately three weeks. The FAFSA also may be obtained from your high school guidance office, college financial aid office, or by calling 1 - 800 - 4 FED AID.

### GENERAL INFORMATION

The due date for all applications is April 15<sup>th</sup>. Applications that are not received at the CSF office by April 15<sup>th</sup> will not be considered, but may be resubmitted for review in the following year. **Applications are reviewed in May and scholarships are usually awarded in June.**

**Each scholarship is applicable to tuition, room and board, incidental fees, and books.** Scholarships are awarded for a specified number of semesters determined by the WGA Caddie Scholarship Selection Committee. In order to remain eligible for a scholarship, the recipient must remain enrolled as a student in good academic standing, and continue to require financial assistance. If a recipient does not enter school within one year of receiving an award, leaves school at any time thereafter, or is found by the Board of Directors to have behaved in a manner not in keeping with the highest standards of moral, ethical and legal behavior, the scholarship award may be canceled. Payments of scholarship awards are made directly to the college attended.

**PERSONAL INFORMATION**

- 1. Name of applicant \_\_\_\_\_  

*Last**First**Middle*
- 2. Home Address \_\_\_\_\_  

*Number and Street**Apt./Floor**City**State**Zip Code*
- 3. Home telephone # (     ) \_\_\_\_\_
- 4. Cell Phone # (     ) \_\_\_\_\_
- 5. Applicant's Email: \_\_\_\_\_
- 6. Parent's Email: \_\_\_\_\_
- 7. Date of Birth: \_\_\_\_\_
- 8. SS#: \_\_\_\_\_
- 9. Male [    ]   Female [    ]
- 10. Are you a U.S. Citizen? Yes [    ]   No [    ]   If "no", Status: \_\_\_\_\_
- 11. Last High School Attended \_\_\_\_\_  
Name and Location \_\_\_\_\_  
Date Diploma or Degree Received \_\_\_\_\_
- 12. State briefly your participation in athletic and other activities, including offices held. (Attach additional page if needed.)  
\_\_\_\_\_

**FAMILY INFORMATION**

- 13. Father's name \_\_\_\_\_ Father's Occupation \_\_\_\_\_  
(If deceased, please state)  
Employer & Employer Address \_\_\_\_\_
- 14. Mother's name \_\_\_\_\_ Mother's Occupation \_\_\_\_\_  
(If deceased, please state)  
Employer & Employer Address \_\_\_\_\_
- 15. List private/social clubs to which you or your family belong \_\_\_\_\_
- 16. Do you or your parents own home? Yes [    ]   No [    ]
- 17. Rent? Yes [    ]   No [    ]
- 18. Number in household \_\_\_\_\_
- 19. Number in household attending college in coming school year (including applicant) \_\_\_\_\_
- 20. Have any other household members received, or are any currently receiving a WGA Caddie Scholarship? Yes [    ]   No [    ]  
If so, please list name, school and year  
\_\_\_\_\_

**SCHOOL INFORMATION**

*To be eligible for a scholarship, you must currently be attending or planning to attend a college, university or accredited trade school. Graduate students are not eligible to apply. Please indicate your college preferences and application status:*

College, University or Trade School (List in order of preference)	Date Application Filed	Accepted/Attending
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Indicate the subject(s) or profession in which you wish to specialize: \_\_\_\_\_

# SERVICE TO GOLF

In order to be eligible for a scholarship, you must have completed **two seasons** in "service to golf" at a WGA member club. "Service to golf" includes caddying, work in the golf shop, bag room, on the practice range and golf course superintendent's crew.

**Member clubs of the WGA as of 9/22/08:** APAWAMIS CLUB ARDSLEY CC BEDFORD G & TC  
 BIRCHWOOD CC BLIND BROOK CLUB BONNIE BRIAR CC BRAE BURN CC BRANTON WOODS GC  
 BROOKLAWN CC BURNING TREE CC CENTURY CC CONNECTICUT GC CC of DARIEN DELLWOOD CC  
 DORAL GC DUTCHESS G & CC ELMWOOD CC CC of FAIRFIELD FAIRVIEW CC FENWAY GC  
 GARRISON GC GLENARBOR GC GREENWICH CC HAMPSHIRE CC HOLLOW BROOK GC HUDSON  
 NATIONAL GC INNIS ARDEN CC KNOLLWOOD CC LAKE ISLE GC LEEWOOD GC MAHOPAC  
 GC MANHATTAN WOODS GC METROPOLIS CC MILBROOK CLUB MINISCEONGO GC MOUNT  
 KISCO CC CC of NEW CANAAN OLD OAKS CC ORANGE COUNTY CC ORONOQUE CC  
 OSIRIS CC OTTERKILL CC PATTERSON CLUB PELHAM CC POWELTON CLUB GC of PURCHASE  
 QUAKER HILL CC QUAKER RIDGE GC RIDGEWAY CC RIDGEWOOD CC ROCKLAND CC  
 ROCKRIMMON CC ROLLING HILLS CC RYE GC SAINT ANDREW'S GC SALEM GC SCARSDALE GC  
 SEDGEWOOD GC SHOREHAVEN GC SILVERMINE GC SIWANoy CC SLEEPY HOLLOW CC  
 SOMERS POINTE GC STANWICH CLUB STORM KING GC SUNNINGDALE CC TAMARACK CC TRUMP  
 NATIONAL GC TUXEDO CLUB VILLA ROMA CC WACCABUC CC WEE BURN CC WESTCHESTER  
 CC WESTCHESTER HILLS GC WEST POINT GC WHIPPOORWILL CLUB  
 WILLOW RIDGE CC WINGED FOOT GC WOODWAY CC WYKAGYL CC

Please  
 attach  
 a photograph  
 here.  
 (OPTIONAL)

**Please indicate your Service to Golf:**

Club Name \_\_\_\_\_

Type of Work \_\_\_\_\_

Name & Title of Person for whom you worked \_\_\_\_\_

From Month/Year \_\_\_\_\_ to \_\_\_\_\_ Hours Per Week \_\_\_\_\_

Indicate any recognition, awards or honors \_\_\_\_\_

\_\_\_\_\_

Club Name \_\_\_\_\_

Type of Work \_\_\_\_\_

Name & Title of Person for whom you worked \_\_\_\_\_

From Month/Year \_\_\_\_\_ to \_\_\_\_\_ Hours Per Week \_\_\_\_\_

Indicate any recognition, awards or honors \_\_\_\_\_

\_\_\_\_\_

## CLUB ENDORSEMENT

**I hereby certify that the candidate has served a minimum of two seasons "in service to golf."**

\_\_\_\_\_  
 Name of Club

\_\_\_\_\_  
 Signature of Club Officer \*\* Title Date

\_\_\_\_\_  
 Signature of Caddie Master or Golf Professional\*\* Title Date

The Applicant's service at the Club is considered to be: Full Time [ ] Part Time [ ]

**\*\* Both signatures are required.**

**If your club is closed, submit the application and ask your club to send a written endorsement for you as soon as possible.**

## REFERENCES

Please provide two personal references (not related to you) who are mature persons, have known you for several years, and are of good standing in the community.

Name                      Number and Street                      City                      State      Zip Code

-----  
-----

## PARENT/GUARDIAN'S ENDORSEMENT

As the \_\_\_\_\_ of this applicant, I hereby declare:  
(Father, Mother, Guardian)

1. That the estimated \$ amount I (we) expect to contribute to the applicant's annual cost of school is \$\_\_\_\_\_.
2. That I have read this application for a WGA Caddie Scholarship as filled out by the applicant.
3. That the answers given are true and correct.
4. That I approve this application for scholarship aid.

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

## APPLICANT'S ENDORSEMENT

I declare that the answers given in this application are true to the best of my knowledge.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**REMARKS:** (Use this space to provide any other information that may be helpful in the review of your application.)